

July 29, 2002

**GUIDANCE ON ACCESS TO CPRS READ ONLY FUNCTIONALITY
FOR AUTHORIZED USERS**

1. PURPOSE: This Veterans Health Administration (VHA) Directive establishes policy providing authorized users electronic access to individually-identifiable health information using the Computerized Patient Record System (CPRS) Read Only software. ***NOTE:** Potential users include Veterans Service Organizations (VSOs), Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the external peer review program (EPRP), and Department of Veterans Affairs (VA) employees and contractors.*

2. BACKGROUND

a. Under the Privacy Act of 1974, Title 5 United States Code (U.S.C.) 552a(e)(10), “agencies shall establish appropriate administrative, technical, and physical safeguards to ensure the security and confidentiality of records and to protect against any anticipated threats or hazards to their security or integrity which could result in substantial harm, embarrassment, inconvenience, or unfairness to any individual on whom information is maintained.” With the enactment of the Privacy Act, Congress required agencies to employ reasonable technological safeguards to protect individually-identifiable health information that is stored electronically.

b. The Health Insurance Portability and Accountability Act (HIPAA) of 1996 (Public Law 104-191) includes requirements to ensure the security and privacy of individually-identifiable health information. HIPAA-proposed security standards, published August 12, 1998, apply to all health information which pertains to an individual and is electronically maintained or electronically transmitted. HIPAA privacy standards, published December 28, 2000, include restrictions on access to individually-identifiable health information, and the use and disclosure of that information, as well as requirements for administrative activities such as training, compliance, and enforcement.

c. Under the provisions of 38 U.S.C. §14.626-14.635, qualified organizations outside VA may be granted recognition by VA in order to assist veterans in the preparation, presentation, and prosecution of claims for veterans’ benefits. Title 38 outlines the requirements for recognition and defines the process by which representatives of a recognized organization may become accredited by the Department. Accredited representatives of VSOs possessing Power of Attorney (POA), or formal written consent, are authorized to obtain access to all information in the veteran’s record in accordance with VHA privacy and security policies. Accredited VSO representatives are not required to undergo background investigations in order to receive electronic access to the records of veterans for whom they hold POA.

d. Definitions

(1) Authorized User

(a) For purposes of this directive, an authorized user is defined as an individual who is permitted by:

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1. Federal law and regulations to have access to or obtain a copy of individually-identifiable health information, and

2. VA to have access to VA automated information systems.

(b) Authorized users include, but are not limited to, VA employees, VA contractors (including JCAHO and EPRP), VA business partners, volunteers, trainees, students, and accredited VSO representatives who have met these requirements.

(2). **CPRS Read Only.** CPRS Read Only is a software tool which enables medical centers to grant authorized users read-only access to veterans' individually-identifiable health information, and to restrict a user's access to a specific set of patient records.

3. POLICY: It is VHA policy that authorized users are provided electronic access to individually-identifiable health information through CPRS Read Only in accordance with Federal law and VA policy.

4. ACTION: The VA Medical Center Director must ensure that:

a. The process outlined in subparagraphs 4b and 4c is in place by August 15, 2002.

b. Access for authorized VSO users is managed as follows:

(1) An Access Coordination Group is established to manage VSO access to CPRS Read Only. The group includes representatives from Health Information Management (HIM) and Information Resource Management (IRM), as well as the Privacy Officer, the Information Security Officer (ISO), and a Clinical Application Coordinator (CAC).

(2) The HIM representative, Privacy Officer, or other appropriate official, serves as the coordinator of the Access Coordination Group.

(3) All VSO requests for access to CPRS Read Only are referred to the facility Release of Information Office for approval. VSO representatives are required to submit written requests for access to CPRS Read Only (see Attachment A). The Chief, HIM, or designee, approves requests upon verification of accreditation and authorization, as described in subparagraphs 4b(5) and 4b(6).

(4) The Access Coordination Group appoints appropriate medical center staff to handle user management tasks for VSO users, including setting up the Veterans Health Information System and Technology Architecture (VistA) and network accounts with the appropriate access options and restrictions, and deactivating those accounts when access is no longer needed. These tasks are conducted at the direction of the HIM representative or designated group coordinator.

(5) The HIM representative, or designee, verifies that the VSO representative is accredited in accordance with 38 U.S.C. §14.626-14.635. **NOTE:** *VA Office of the General Counsel maintains a list of accredited organizations and representatives on the VA intranet which can be used for this purpose. The address is <http://vaww.gc.va.gov/law/> (click the Accreditation button to view the list). Background investigations are not required for accredited VSO representatives.*

(6) The HIM representative, or designee, verifies that the VSO representative has:

(a) A valid POA or other formal authority to view such information in accordance with VHA M-1, Part I, Chapter 9, Release of Medical Information.

(b) Authority to review information concerning treatment for alcoholism, alcohol abuse, drug abuse, sickle cell anemia, or infection with the human immunodeficiency virus (HIV) in accordance with 38 U.S.C. 7332, either as part of the POA or in a separate, written consent. **NOTE:** *This authority must be verified regardless of whether the veteran's record currently includes information protected under 38 U.S.C. 7332.*

(7) The ISO, or designee, verifies that the VSO representative has completed the VA Cyber Security Awareness course in accordance with VHA Directive 6210, as well as the CPRS Read Only Rules of Behavior for VSOs (see Attachment B), and notifies the HIM representative that these requirements have been met.

(8) The HIM representative, or designee, notifies IRM and the designated user management staff that the VSO representative has met the privacy and security requirements for access to individually-identifiable health information and requests that VistA and network accounts be established giving the user access to CPRS Read Only. The request contains the name(s) of the veteran(s) whose information the user is authorized to review. **NOTE:** *This information is used to create the restricted list.*

(9) The HIM representative, or designee, determines if the POA revokes a POA granted previously to another individual or organization. If it does, the HIM representative: notifies IRM and the designated user management staff of the name of any user previously granted access on the basis of POA for the same veteran; requests that the veteran's name be removed from that user's restricted list; and documents the revocation in the veteran's record. If a user no longer holds valid POA for any veterans, the HIM representative requests that the user's account(s) be deactivated. **NOTE:** *POA may be granted to an individual or to the VSO organization. If POA is granted to the organization, more than one representative of that organization may be given access to the veteran's record through CPRS Read Only.*

(10) The designated user management staff sets up the VistA account for the VSO user, such that the user's access is restricted to the records of veterans specified by the HIM representative.

(11) The HIM representative, or designee, documents the initial disclosure of the veteran's protected health information to the VSO at the time the account is established, using the automated or manual system already in place at the site, in accordance with VHA M-1, Part I,

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Chapter 9, Release of Medical Information. HIM files the approved request for access in the veteran's administrative record.

(12) If the VSO representative is subsequently granted POA by another veteran, the VSO must submit a separate written request for access to that veteran's protected health information. For each request, the HIM representative verifies the VSO's accreditation and authorization, and documents the initial disclosure, as described in subparagraphs 4b(5), 4b(6), and 4b(11).

(13) Appropriate time periods and renewal processes are established for user accounts. VSOs are granted access to CPRS Read Only for a period of 1 year. Each year, the HIM representative reconfirms the VSO user's accreditation, and ensures that the VSO has completed a new Rules of Behavior form and VA Cyber Security Awareness recertification.

(14) The Access Coordination Group ensures that any inappropriate use or disclosure of individually-identifiable health information by a VSO representative is referred to the Privacy Officer, ISO, and General Counsel.

(15) The Access Coordination Group designates at least one workstation for use by authorized VSO users who are not stationed at the facility, and installs the most current version of the CPRS Graphic User Interface (GUI) executable on this workstation for their use. **NOTE:** *Electronic reading room workstations used for Freedom of Information Act (FOIA) access may be used for this purpose. The site may also install the CPRS Graphical User Interface executable on workstations assigned to authorized VSO users stationed at the facility.*

(16) The Access Coordination Group establishes a schedule for training VSO users on the use of CPRS Read Only and designates staff responsible for conducting such training. The HIM representative must make VSO users aware of training schedules.

(17) Remote access by VSOs is not permitted until VA issues a policy on such access.

c. Access for all other authorized users is managed as follows:

(1) Users who do not need full access to CPRS in order to effectively perform their functions (e.g., billing) may be granted access to CPRS Read Only in accordance with established processes and guidance. **NOTE:** *CPRS Read Only must not be assigned to users who are authorized to enter or modify information in the patient record.*

(2) Users such as JCAHO and EPRP, who require access for specific, short-term reviews, are granted access only for the period of time required to complete such reviews.

(3) The investigative process specified in VA Handbook 0710, Personnel and National Information Security, regarding background investigations for authorized users must be followed.

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(a) Authorized users are considered “Low Risk” users for the purpose of determining the type of investigation required.

(b) Contracts and business partner agreements must be written to include requirements for background investigations in accordance with VA Handbook 0710, and these requirements must be met before users covered by these contracts and agreements are granted access to CPRS Read Only.

5. REFERENCES

- a. Title 38 U.S.C. 7332.
- b. Title 38 U.S.C. §14.626-14.635.
- c. Privacy Act of 1974.
- d. Health Information Portability and Accountability Act of 1996, Public Law 104-191.
- e. VHA Manual-1, Part I, Chapter 9, Release of Medical Information.
- f. VA Handbook 0710, Personnel and National Information Security.
- g. VHA Directive 6210, Automated Information Systems (AIS) Security.

6. FOLLOW-UP RESPONSIBILITY: The Director, Information Assurance Office (19F) is responsible for the content of this VHA Directive.

7. RECESSIONS: None. This VHA Directive expires August 31, 2007.

Robert H. Roswell, M.D.
Under Secretary for Health

Attachments

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ATTACHMENT A

**VA FORM 10-0400, REQUEST FOR VETERANS SERVICE ORGANIZATION (VSO)
ACCESS TO COMPUTER PATIENT RECORD SYSTEM (CPRS) READ ONLY**

Below is an embedded copy of Department of Veterans Affairs (VA) Form 10-0400, Request for Veterans Service Organization (VSO) Access to Computer Patient Record System (CPRS) Read Only. This form can also be found on the Veterans Health Administration (VHA) Forms Intranet at <http://vaww.va.gov/forms/medical/searchlist.asp>. This is to be used for local reproduction. Since this is a low use form, it will not be stocked by the Hines Service and Distribution Center (formerly known as the Forms and Publications Depot).

You should use Adobe Acrobat 5.05 or later to view this form. To print this form, your printer must be set to “print as image” and “fit to page.”



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ATTACHMENT B

**VA FORM 10-0400A, COMPUTER PATIENT RECORD SYSTEM (CPRS) READ ONLY
RULES OF BEHAVIOR FOR VETERANS SERVICE ORGANIZATIONS**

Below is an embedded copy of Department of Veterans Affairs (VA) Form 10-0400A, Computer Patient Record System (CPRS) Read Only Rules of Behavior for Veterans Service Organizations. This form can also be found on the Veterans Health Administration (VHA) Forms Intranet at <http://vaww.va.gov/forms/medical/searchlist.asp>. This is to be used for local reproduction. Since this is a low use form, it will not be stocked by the Hines Service and Distribution Center (formerly known as the Forms and Publications Depot).

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